

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>D.B.</i>	<i>220004-23-00</i>	
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>AB</i>	<i>46222</i>	<i>7-30-00</i>

09/575104

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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